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| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: | |
| NORTHERN DISTRICT OF ILLINOIS | |
| Case number (if known) | Chapter you are filing under: |
| | ■ Chapter 7 |
| | ☐ Chapter 11 |
| | ☐ Chapter 12 |
| | ☐ Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | tt 1: Identify Yourself | | | |
|----|--|---|--|---|
| | | About Debtor 1: | | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). | Karrine First name K. Middle name | | First name Middle name |
| | Bring your picture identification to your meeting with the trustee. | Gatenby Last name and Suffix (Sr., Jr., II, III) | | Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years | • | | |
| | Include your married or maiden names. | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-2231 | | |

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Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | |
|----|--|---|---|--|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) EINs | ☐ I have not used any business name or EINs. Business name(s) EINs | | |
| 5. | Where you live | 29 South School Street | If Debtor 2 lives at a different address: | | |
| | | Cary, IL 60013 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | |
| | | McHenry County | County | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | |
| 6. | Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. □ I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | |

Debtor 1 Karrine K. Gatenby

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| Deb | otor 1 Karrine K. Gatenby | | | | | Case number (if known) | |
|-----|--|---|--------------------------------|--|--|---|-----------|
| | | | | | | | |
| Par | t 2: Tell the Court About | our Bankı | uptcy Case | | | | |
| 7. | The chapter of the Bankruptcy Code you are | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | |
| | choosing to file under | ■ Chapt | er 7 | | | | |
| | | ☐ Chapt | er 11 | | | | |
| | | ☐ Chapt | er 12 | | | | |
| | | ☐ Chapt | er 13 | | | | |
| | | | | | | | |
| 8. | How you will pay the fee | abo orde | ut how you may | ly pay. Typically, if you | ou are paying the fee | neck with the clerk's office in your local court for most yourself, you may pay with cash, cashier's check, behalf, your attorney may pay with a credit card or c | or money |
| | | | | | | ption, sign and attach the Application for Individuals | s to Pay |
| | | | • | nstallments (Official | , | ntion only if you are filing for Chapter 7. By law, a jud | dae may |
| | | but that | is not required applies to you | to, waive your fee, a r family size and you | nd may do so only if are unable to pay th | your income is less than 150% of the official pover ne fee in installments). If you choose this option, yo d (Official Form 103B) and file it with your petition. | rty line |
| 9. | Have you filed for | - | | | | | |
| ٥. | bankruptcy within the | ■ No. | | | | | |
| | last 8 years? | ☐ Yes. | D: | | 144 | | |
| | | | | | When When | | |
| | | | District | | when When | Case number Case number | |
| | | | District | | wilen | Case Humber | |
| 10. | Are any bankruptcy | ■ No | | | | | |
| | cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes. | | | | | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| 11. | Do you rent your | □ No. | Go to line 12 | 2. | | | |
| | residence? | ■ Yes. | Has your lar | ndlord obtained an e | viction judgment aga | inst you and do you want to stay in your residence? | ? |
| | | — 165. | · | Go to line 12. | | | |
| | | | _ | | nent About an Eviatio | on Judgment Against You (Form 101A) and file it w | ith this |
| | | | | ruptcy petition. | TIOTE ADOUG ATT EVICER | on oddyment Agamst Tou (Form 101A) and me it w | 1011 0115 |

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| Deb | otor 1 Karrine K. Gatenby | 1 | | Case number (if known) | | | |
|-----|---|---|---|---|--|--|--|
| | | | | | | | |
| Par | Report About Any Bu | sinesses | You Own as a Sole Propri | etor | | | |
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to Part 4. | | | | |
| | | ☐ Yes. | Name and location of bu | siness | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name of business, if any | / | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. | | Number, Street, City, St | ate & ZIP Code ox to describe your business: | | | |
| | it to this petition. | | • • • | iness (as defined in 11 U.S.C. § 101(27A)) | | | |
| | | | _ | al Estate (as defined in 11 U.S.C. § 101(51B)) | | | |
| | | | _ • | defined in 11 U.S.C. § 101(53A)) | | | |
| | | | ☐ Commodity Brok | er (as defined in 11 U.S.C. § 101(6)) | | | |
| | | | ■ None of the above | ve | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statem operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procini 11 U.S.C. 1116(1)(B). | | | | | |
| | For a definition of small | ■ No. | I am not filing under Cha | apter 11. | | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am filing under Chapte Code. | r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy | | | |
| | | ☐ Yes. | I am filing under Chapte | r 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | | |
| Par | t 4: Report if You Own or | Have Any | / Hazardous Property or A | ny Property That Needs Immediate Attention | | | |
| 14. | Do you own or have any | ■ No. | | | | | |
| | property that poses or is alleged to pose a threat of imminent and identifiable hazard to | ☐ Yes. | What is the hazard? | | | | |
| | public health or safety? Or do you own any property that needs immediate attention? | | If immediate attention is needed, why is it needed? | | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is the property? | | | | |
| | | | | Number, Street, City, State & Zip Code | | | |

| Case 16-80 | 084 | Doc 1 F | Filed 01/18/16 Document | Entered Page 5 o | | 16 11:27:56 | Desc Main |
|--|-------|--|---|---|-----|--|--|
| Debtor 1 Karrine K. Gatenby | / | | | | | Case number (if kno | wn) |
| Part 5: Explain Your Efforts | to Re | ceive a Briefing | About Credit Couns | eling | | | |
| | Abo | out Debtor 1: | | | Abo | out Debtor 2 (Spous | se Only in a Joint Case): |
| 15. Tell the court whether you have received a briefing about credit counseling. The law requires that you receive a briefing about | You | counseling age filed this bankr certificate of co | efing from an approvency within the 180 druptcy petition, and I ompletion. If the certificate and the | lays before I received a | | counseling agency this bankruptcy p completion. Attach a copy of the | ng from an approved credit cy within the 180 days before I filed etition, and I received a certificate of e certificate and the payment plan, if |
| credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to | | I received a bri | efing from an approvency with the sering from an approvency within the 180 druptcy petition, but I completion. | ved credit lays before I | | I received a briefi counseling agence | ng from an approved credit y within the 180 days before I filed etition, but I do not have a pletion. |
| file. If you file anyway, the court can dismiss your case, you | | | after you file this bank JST file a copy of the of any. | | | | er you file this bankruptcy petition, you fithe certificate and payment plan, if |
| will lose whatever filing fee you paid, and your creditors can begin collection activities again. | | services from a unable to obtai days after I ma | sked for credit coun an approved agency, in those services du de my request, and e merit a 30-day temp nent. | but was ring the 7 exigent | | from an approved agency those services during the | ed for credit counseling services I agency, but was unable to obtain Iring the 7 days after I made my ent circumstances merit a 30-day of the requirement. |
| | | To ask for a 30-requirement, att what efforts you you were unable bankruptcy, and required you to be a still receive a bright you must file a agency, along with developed, if an may be dismission only for cause a days. | day temporary waiver ach a separate sheet in made to obtain the bit to obtain it before you what exigent circums file this case. be dismissed if the conjunctive of | explaining riefing, why use filed for stances furt is receiving a y. ons, you must after you file. proved nent plan you your case is granted imum of 15 | | attach a separate s to obtain the briefin before you filed for circumstances requ Your case may be with your reasons of filed for bankruptcy If the court is satisf receive a briefing of file a certificate froi copy of the payme not do so, your case Any extension of th cause and is limite | fied with your reasons, you must still within 30 days after you file. You must me the approved agency, along with a not plan you developed, if any. If you do see may be dismissed. The 30-day deadline is granted only for d to a maximum of 15 days. The receive a briefing about credit |
| | | credit counseli | ng because of: | illness or a cy that makes realizing or | _ | counseling becau | |
| | | ☐ Disability | My physical disa me to be unable in a briefing in p phone, or throug internet, even af reasonably tried | to participate erson, by gh the fter I | | ☐ Disability. | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. |
| | | briefing about cr | uty. I am currently or military duty in a combat zone. ou are not required to redit counseling, you r er of credit counseling | n military receive a must file a | | | I am currently on active military duty in a military combat zone. are not required to receive a briefing eling, you must file a motion for waiver g with the court. |

court.

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| Deb | tor 1 Karrine K. Gatenby | , | | Case number | (if known) | | | |
|------|--|---|--|---|---|--|--|--|
| Part | 6: Answer These Questi | ons for R | eporting Purposes | | | | | |
| | What kind of debts do you have? | 16a. | | | ned in 11 U.S.C. § 101(8) as "incurred by an | | | |
| | | | ☐ No. Go to line 16b. | | | | | |
| | | | Yes. Go to line 17. | | | | | |
| | | 16b. | | ss debts? Business debts are debts into through the operation of the business. | | | | |
| | | | ☐ No. Go to line 16c. | | | | | |
| | | | ☐ Yes. Go to line 17. | | | | | |
| | | 16c. | State the type of debts you owe th | at are not consumer debts or busines | s debts | | | |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under Chapter 7. Go | to line 18. | | | | |
| | Do you estimate that after any exempt property is excluded and | ■ Yes. | | u estimate that after any exempt prop e available to distribute to unsecured | | | | |
| | administrative expenses are paid that funds will | | ■ No | | | | | |
| | be available for distribution to unsecured creditors? | | Yes | | | | | |
| 18. | How many Creditors do you estimate that you owe? | ■ 1-49 □ 50-99 □ 100-1 □ 200-9 | 99 | ☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000 | | | |
| 19. | How much do you estimate your assets to be worth? | □ \$100, | 50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million | □ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million | ☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion | | | |
| 20. | How much do you estimate your liabilities to be? | □ \$100, | 50,000 001 - \$100,000 001 - \$500,000 001 - \$1 million | □ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million | □ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion | | | |
| Part | 7: Sign Below | | | | | | | |
| | you | I have ex | ramined this petition, and I declare u | under penalty of perjury that the inform | nation provided is true and correct. | | | |
| | | United St | tates Code. I understand the relief a | vailable under each chapter, and I ch | · | | | |
| | | documen | attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this iment, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | | | | |
| | | I request | quest relief in accordance with the chapter of title 11, United States Code, specified in this petition. | | | | | |
| | | bankrupt 1519, an | rstand making a false statement, concealing property, or obtaining money or property by fraud in connection with a uptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, and 3571. Irrine K. Gatenby | | | | | |
| | | Karrine | K. Gatenby e of Debtor 1 | Signature of Debtor | 2 | | | |
| | | Executed | January 18, 2016 MM / DD / YYYY | Executed on MM | / DD / YYYY | | | |
| | | | | Wilvi | | | | |

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| Debtor 1 Karrine K. Gatenby | , | Case | Case number (if known) | | | | |
|---|---|----------------------------|--|--|--|--|--|
| | | | | | | | |
| For your attorney, if you are represented by one | | ed States Code, and have e | informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § | | | | |
| If you are not represented by an attorney, you do not need to file this page. | 342(b) and, in a case in which § 707(b)(4)(Ď) in the schedules filed with the petition is incor | | no knowledge after an inquiry that the information | | | | |
| , 0 | /s/ Rebecca Lamm Signature of Attorney for Debtor | Date | January 18, 2016 MM / DD / YYYY | | | | |
| | Rebecca Lamm Printed name | | | | | | |
| | Franks Gerkin & McKenna PC | | | | | | |
| | 19333 E Grant Hwy P.O. Box 5 | | | | | | |
| | Marengo, IL 60152 Number, Street, City, State & ZIP Code | | | | | | |
| | Contact phone 815-923-2107 | Email address | | | | | |
| | 6300284 | | | | | | |

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| Debtor 1 | Karrine K. Gate | enby | | |
|---------------------|------------------------|----------------------|---------------------------|--------------------------------------|
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for th | e: NORTHERN DISTRICT | OF ILLINOIS | |
| (if known) | | | | ☐ Check if this is an amended filing |
| | orm 106Sum | | nd Cartain Statistical II | nformation 42/45 |

| | mmary of Your Assets and Liabilities and Certain Statistical Information | | 12/15 |
|------|---|---------------------------|-----------------------------------|
| info | as complete and accurate as possible. If two married people are filing together, both are equally responsible formation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend roriginal forms, you must fill out a new <i>Summary</i> and check the box at the top of this page. | or supplyii led schedi | ng correct ules after you file |
| Par | t 1: Summarize Your Assets | | |
| | | Your as | ssets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 24,843.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 24,843.00 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | abilities It you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 20,000.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 26,623.31 |
| | Your total liabilities | \$ | 46,623.31 |
| Par | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 4,338.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 4,305.00 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | our other so | chedules. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for | a personal | l, family, or |

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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| Debto | 1 Karrine K. Gatenby | Case number (if known) | |
|-------|---|------------------------|----------------|
| | rom the <i>Statement of Your Current Monthly Income</i> : Co 22A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 | | \$ 6,179.13 |

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total clai | m |
|--|------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

| | or 1 | Karrine K. G | atenby | | | | |
|---|--|--|---|--|---|---|---|
| | | First Name | • | Middle Name | Last Name | | |
| Debto | or 2 e, if filing) | First Name | | Middle Name | Last Name | | |
| | | | | | | | |
| Unite | d States Bar | nkruptcy Court fo | r the: NORT | HERN DISTRICT (| OF ILLINOIS | | |
| Case | number | | | | | | ☐ Check if this is a |
| | | | | | | | amended filing |
| | | | | | | | |
| ∩ffi | cial Fo | rm 106A/E | 3 | | | | |
| _ | | _ | | | | | |
| | | e A/B: P | | | | | 12/15 |
| t fits b | est. Be as co | mplete and accura | ate as possible. | . If two married peop | ce. If an asset fits in more than or le are filing together, both are equ any additional pages, write your n | ally responsible for supplying | correct information. If |
| Part 1 | Describe E | Each Residence, B | uilding, Land, c | or Other Real Estate | You Own or Have an Interest In | | |
| . Do | ou own or ha | ave any legal or eq | uitable interest | in any residence, bu | uilding, land, or similar property? | | |
| I | lo. Go to Part | 2. | | | | | |
| _ | es. Where is | | | | | | |
| | _ | | | | | | |
| | | | | | | | |
| Do yo somed | u own, leas one else driv | e, or have legal es. If you lease a | a vehicle, also | | hicles, whether they are regis ule G: Executory Contracts and es | | vehicles you own that |
| Do yo somed | u own, leas one else driv rs, vans, tru | e, or have legal es. If you lease a | a vehicle, also | report it on Schedu | ule G: Executory Contracts and | | vehicles you own that |
| Do yo somed 3. Ca | u own, leas one else driv rs, vans, tru No res | e, or have legal es. If you lease a acks, tractors, s | a vehicle, also | report it on Schedu | ule G: Executory Contracts and | Unexpired Leases. | · |
| Do yo somed 3. Ca | u own, leas one else driv rs, vans, tru No res | e, or have legal es. If you lease a cks, tractors, s | a vehicle, also | report it on Schedu | ule G: Executory Contracts and | Do not deduct secured of the amount of any secure | laims or exemptions. Put ed claims on <i>Schedule D:</i> |
| Do yo somed 3. Call | u own, leas one else driv rs, vans, tru No res Make: T Model: F | e, or have legal es. If you lease a cks, tractors, s oyota Prius | a vehicle, also | report it on Schedu hicles, motorcycle Who has an intere Debtor 1 only | ule G: Executory Contracts and | Do not deduct secured of the amount of any secure | laims or exemptions. Put |
| Do yo somed 3. Call | w own, lease one else drivers, vans, truendo of es Make: Total Model: Formula year: 2 | e, or have legal es. If you lease a cks, tractors, s oyota Prius | a vehicle, also port utility ve | who has an interest Debtor 1 only Debtor 2 only | es est in the property? Check one | Do not deduct secured of the amount of any secure Creditors Who Have Clar. Current value of the | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the |
| Do yo somed 3. Call | u own, leas one else driv rs, vans, tru No res Make: T Model: F | e, or have legal es. If you lease a lcks, tractors, s oyota Prius 013 mileage: | a vehicle, also | who has an interest Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 1 | es est in the property? Check one ebtor 2 only | Do not deduct secured control the amount of any secure Creditors Who Have Class | laims or exemptions. Put ed claims on <i>Schedule D:</i> ims Secured by Property. |
| Do yo somed 3. Call | u own, leas one else driv rs, vans, tru No res Make: T Model: F Year: 2 Approximate Other inform | e, or have legal es. If you lease a lcks, tractors, s oyota Prius 013 mileage: | port utility ve | who has an interest Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 1 | es est in the property? Check one | Do not deduct secured of the amount of any secure Creditors Who Have Clar. Current value of the entire property? | laims or exemptions. Put ad claims on Schedule D: ims Secured by Property. Current value of the portion you own? |
| Do yo somed 3. Call | u own, leas one else driv rs, vans, tru No res Make: T Model: F Year: 2 Approximate Other inform | e, or have legal es. If you lease a lcks, tractors, s royota Prius 1013 mileage: ation: possessed by | port utility ve | who has an intered Debtor 1 only Debtor 2 only Debtor 1 and D At least one of the Check if this is | es est in the property? Check one ebtor 2 only the debtors and another s community property | Do not deduct secured of the amount of any secure Creditors Who Have Clar. Current value of the | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the |
| somed 3. Cal | u own, leas one else drivers, vans, true No Yes Make: The Model: Family Year: 2 Approximate Other inform Vehicle re | e, or have legal es. If you lease a lcks, tractors, s royota Prius 1013 mileage: ation: possessed by | port utility ve | who has an intered Debtor 1 only Debtor 1 and D. At least one of the | es est in the property? Check one ebtor 2 only the debtors and another s community property | Do not deduct secured of the amount of any secure Creditors Who Have Clar. Current value of the entire property? | laims or exemptions. Put ad claims on Schedule D: ims Secured by Property. Current value of the portion you own? |
| Do yo someo | Make: Total Model: Pressure of the inform Vehicle re 12/29/201 | e, or have legal es. If you lease a cks, tractors, s oyota Prius 013 mileage: ation: possessed by | port utility ve | who has an interest Debtor 1 only Debtor 2 only Debtor 1 and D At least one of the Csee instructions) | es est in the property? Check one ebtor 2 only the debtors and another s community property | Do not deduct secured of the amount of any secure Creditors Who Have Clast Current value of the entire property? \$13,000.00 | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$13,000.00 |
| Do yo somed 3. Call | wown, lease one else drivers, vans, true No Yes Make: The Model: Faperoximate Other inform Vehicle re 12/29/201 | e, or have legal es. If you lease a lcks, tractors, s coyota Prius 1013 mileage: ation: possessed by 5 | port utility ve | who has an intered Debtor 1 and Debtor 1 and Debtor 1 and Debtor 1 and Debtor 2 check if this is (see instructions) | es est in the property? Check one ebtor 2 only the debtors and another s community property | Do not deduct secured of the amount of any secure Creditors Who Have Class Current value of the entire property? \$13,000.00 Do not deduct secured of the amount of any secure | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$13,000.00 |
| Do yo someo | wown, lease one else drivers, vans, true No Yes Make: The Model: Paper Vehicle re 12/29/201 Make: Model: Model: Model: The Model: T | e, or have legal es. If you lease a cks, tractors, s oyota Prius 013 mileage: ation: possessed by | port utility ve | who has an intered Debtor 1 and Do At least one of 1 Check if this is (see instructions) Who has an intered Debtor 1 only | es est in the property? Check one ebtor 2 only the debtors and another s community property | Do not deduct secured of the amount of any secure Creditors Who Have Clar. Current value of the entire property? \$13,000.00 Do not deduct secured of the amount of any secure Creditors Who Have Clar. | laims or exemptions. Put ad claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$13,000.00 laims or exemptions. Put ad claims on Schedule D: ims Secured by Property. |
| Do yo someo | wown, lease one else drivers, vans, true No Yes Make: The Model: Paper Vehicle re 12/29/201 Make: Model: Model: Model: The Model: T | e, or have legal es. If you lease a locks, tractors, s oyota Prius 013 mileage: ation: possessed by of oyota Camry 997 | port utility ve | who has an intered Debtor 1 and Debtor 1 and Debtor 1 and Debtor 1 and Debtor 2 check if this is (see instructions) | es est in the property? Check one lebtor 2 only the debtors and another s community property | Do not deduct secured of the amount of any secure Creditors Who Have Class Current value of the entire property? \$13,000.00 Do not deduct secured of the amount of any secure | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$13,000.00 |
| Do yo someo | Make: T Model: T | e, or have legal es. If you lease a locks, tractors, s locyota loc | port utility ve 55,000 creditor | who has an interest Debtor 1 and Debtor 1 only Check if this is (see instructions) Who has an interest Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Check if this is (see instructions) | es est in the property? Check one lebtor 2 only the debtors and another s community property | Do not deduct secured of the amount of any secure Creditors Who Have Class Current value of the entire property? \$13,000.00 Do not deduct secured of the amount of any secure Creditors Who Have Class Current value of the | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$13,000.00 laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the |
| Do yo someo | Make: T Model: T | e, or have legal es. If you lease a locks, tractors, s locyota loc | port utility ve 55,000 creditor | who has an interest Debtor 1 and Debtor 1 only Debtor 1 and Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 and D | es est in the property? Check one ebtor 2 only the debtors and another s community property est in the property? Check one ebtor 2 only the debtors and another | Do not deduct secured of the amount of any secure Creditors Who Have Class Current value of the entire property? \$13,000.00 Do not deduct secured of the amount of any secure Creditors Who Have Class Current value of the | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$13,000.00 laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the |
| Do yo someo | Make: T Model: T | e, or have legal es. If you lease a locks, tractors, s locyota loc | port utility ve 55,000 creditor | who has an interest Debtor 1 and Debtor 1 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 1 only Debtor 1 and Debtor 1 only Debtor 1 and Debtor 1 only Debtor 1 and Debto | es est in the property? Check one ebtor 2 only the debtors and another s community property est in the property? Check one ebtor 2 only the debtors and another | Do not deduct secured of the amount of any secure Creditors Who Have Clar. Current value of the entire property? \$13,000.00 Do not deduct secured of the amount of any secure Creditors Who Have Clar. Current value of the entire property? | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$13,000.00 laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? |
| Do yo someon and a second a second and a second a second and a second | Make: T Model: C Make: T Model: F Year: 2 Approximate Other inform Vehicle re 12/29/201 Make: T Model: C Year: 1 Approximate Other inform | e, or have legal es. If you lease a locks, tractors, s locks, tractors | s vehicle, also port utility ve 55,000 creditor 200,000 | who has an interest Debtor 1 only Debtor 1 and Debtor 1 only Check if this is (see instructions) Who has an interest Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and | es est in the property? Check one ebtor 2 only the debtors and another s community property est in the property? Check one ebtor 2 only the debtors and another | Do not deduct secured of the amount of any secure Creditors Who Have Clar. Current value of the entire property? \$13,000.00 Do not deduct secured of the amount of any secure Creditors Who Have Clar. Current value of the entire property? \$1,000.00 | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$13,000.00 laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? |

Official Form 106A/B Schedule A/B: Property page 1

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| De | ebtor 1 | Karrine K. Ga | renby | Case number (if known) | |
|-----|----------------------|---|---|------------------------------|---|
| 5 | | | he portion you own for all of your entries from Part 2, includ d for Part 2. Write that number here | | \$14,000.00 |
| Pa | art 3: Des | scribe Your Person | al and Household Items | | |
| | | | gal or equitable interest in any of the following items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 6. | Example ☐ No | | rrnishings es, furniture, linens, china, kitchenware | | |
| | ■ Yes. | Describe | | | |
| | | | Kitchen table, small kitchen utensils and appliances, 2 debeds, 1 couch, 2 sitting chairs, 5 dressers, 3 bookshelves tables, bbq grill, etc | | \$1,200.00 |
| 7. | □ No | es: Televisions an | d radios; audio, video, stereo, and digital equipment; computers, phones, cameras, media players, games | printers, scanners; music co | llections; electronic devices |
| | | | 3 TVs, dvd player, bluray player and laptop computer | | \$500.00 |
| 9. | ■ No □ Yes. Equipme | other collection Describe ent for sports an | raphic, exercise, and other hobby equipment; bicycles, pool table | | |
| | ■ No □ Yes. | Describe | | | |
| 10. | ■ No | | shotguns, ammunition, and related equipment | | |
| 11. | □ No | | thes, furs, leather coats, designer wear, shoes, accessories | | |
| | | | Clothes and shoes | | \$500.00 |
| 12. | □ No | | relry, costume jewelry, engagement rings, wedding rings, heirloor | n jewelry, watches, gems, go | ld, silver |
| | | | Costume jewelry | | \$100.00 |
| 13. | | rm animals oles: Dogs, cats, b | irds, horses | | |

☐ No

Yes. Describe.....

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| 2 Cats and 1 Dog | Debtor 1 | Karrine K. Ga | itenby | | | Case number (if known) | |
|--|-------------|--|------------|---------------------------|--------------------------------------|--------------------------------|---|
| No | | | 2 Cats | and 1 Dog | | | \$10.00 |
| Part 3. Write that number here S-2,310.00 | ■ No |) | | - | already list, including any heal | th aids you did not list | |
| Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No Yes | | | | | | es you have attached | \$2,310.00 |
| Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No Yes | Part 4: | Describe Your Financ | ial Assets | | | | |
| Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No Yes Yes Yes Yes | | | | | y of the following? | | <pre>portion you own? Do not deduct secured</pre> |
| Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No | Exa ■ No | <i>mples:</i> Money you h | | | | nd when you file your petitio | n |
| Institution name: 17.1. Checking Account | Exa _ | mples: Checking, sa institutions. | 0 / | | | n credit unions, brokerage h | ouses, and other similar |
| 17.2. Savings Account Fifth Third Bank | | | | | Institution name: | | |
| 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No No Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No Yes. Give specific information about them | | | 17.1. | Checking Account | Fifth Third Bank | | \$1,663.00 |
| Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Yes | | | 17.2. | Savings Account | Fifth Third Bank | | \$0.00 |
| 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No □ Yes. Give specific information about them | _Exa | mples: Bond funds, | | | age firms, money market accoun | ts | |
| and joint venture No Yes. Give specific information about them | _ | | I | Institution or issuer nam | ne: | | |
| Yes. Give specific information about them | and | joint venture | ock and i | nterests in incorporat | ed and unincorporated busines | sses, including an interest | in an LLC, partnership, |
| Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No Yes. List each account separately. Type of account: Institution name: | ☐ Ye | es. Give specific info | | | | % of ownership: | |
| Yes. Give specific information about them Issuer name: Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No Yes. List each account separately. Type of account: Institution name: | Neg Non | notiable instruments n-negotiable instrum | include p | ersonal checks, cashier | rs' checks, promissory notes, and | l money orders. | |
| Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No ■ Yes. List each account separately. Type of account: Institution name: | | | | | | | |
| Type of account: Institution name: | _Exa | <i>mples:</i> Interests in I | | | b), thrift savings accounts, or othe | er pension or profit-sharing p | olans |
| 401(k) JP Morgan Retirement Plan Services \$4,570.00 | ■ Ye | s. List each accoun | | • | Institution name: | | |
| | | | 401(k) |) | JP Morgan Retirement Plan | n Services | \$4,570.00 |

Official Form 106A/B Schedule A/B: Property page 3

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| Debtor 1 Karrine K. Gatenby | | | Case number (if known) | | | |
|-----------------------------|---|-----------------------|--|------------------------------|---|--|
| | Pension | ı | JP Morgan Chase Retirement Debtor will receive \$137.00 pe retirement | er month upon | Unknown | |
| 22. | | ou have made so the | at you may continue service or use fro olic utilities (electric, gas, water), telec | | or others | |
| | ■ Yes | | Institution name or individual: | | | |
| | Rent | | Security Deposit with Revere F | Real Estate | \$1,100.00 | |
| 23 | s. Annuities (A contract for a periodic No | . , | o you, either for life or for a number of | years) | | |
| | Yes Issuer name a | and description. | | | | |
| 24. | . Interests in an education IRA, in at 26 U.S.C. §§ 530(b)(1), 529A(b), and | | ified ABLE program, or under a qua | alified state tuition progra | m. | |
| | ■ No □ Yes Institution nam | ne and description. S | Separately file the records of any interest | ests.11 U.S.C. § 521(c): | | |
| 25 | i. Trusts, equitable or future interes ■ No | ts in property (othe | er than anything listed in line 1), and | d rights or powers exercis | able for your benefit | |
| | ☐ Yes. Give specific information about | out them | | | | |
| 26 | ■ No | websites, proceeds | other intellectual property from royalties and licensing agreemen | nts | | |
| | ☐ Yes. Give specific information about | out them | | | | |
| 27. | Licenses, franchises, and other general Examples: Building permits, exclusion No | | ative association holdings, liquor licens | ses, professional licenses | | |
| | ☐ Yes. Give specific information about | out them | | | | |
| M | loney or property owed to you? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. | |
| 28 | s. Tax refunds owed to you □ No | | | | | |
| | Yes. Give specific information abo | out them, including w | hether you already filed the returns ar | nd the tax years | | |
| | | 2015 Anticip | ated Tax Refund | Federal Tax Refund | \$1,200.00 | |
| 29 | Family support Examples: Past due or lump sum a No □ Yes. Give specific information | | port, child support, maintenance, divo | rce settlement, property set | tlement | |
| 30 | benefits; unpaid loans y | insurance payments | s, disability benefits, sick pay, vacation e else | n pay, workers' compensat | ion, Social Security | |
| | ☐ Yes. Give specific information | | | | | |

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| value: 22. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim | Debtor 1 | Karrine K. Gatenby | Case number (if known) | |
|---|-----------------|--|---|----------------------------|
| Yes. Name the insurance company of each policy and list its value. Company name: Reneficiary: Surrender or refundable: Surrender or surrender or refundable: Surrender or surrendable: Surrender or surrendable: Surrender or surrendable: Surrender or surrendable: Surrend | Exam | | s); credit, homeowner's, or renter's insura | nce |
| If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No Yes. Give specific information 3. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim | | | Beneficiary: | Surrender or refund value: |
| Yes. Give specific information 3. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No | If you some | are the beneficiary of a living trust, expect proceeds from a life insura | ance policy, or are currently entitled to rec | eive property because |
| Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim | | . Give specific information | | |
| No Yes. Describe each claim | Exam ■ No | pples: Accidents, employment disputes, insurance claims, or rights to | | |
| Any financial assets you did not already list No Yes. Give specific information. Be. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here | ■ No | | ounterclaims of the debtor and rights t | o set off claims |
| No Yes. Give specific information Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here | | | | |
| Yes. Give specific information Salad the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here | _ ` | nancial assets you did not already list | | |
| for Part 4. Write that number here | _ | . Give specific information | | |
| 7. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 3. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No | | | | \$8,533.00 |
| No. Go to Part 6. Yes. Go to line 38. Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 3. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No | Part 5: De | escribe Any Business-Related Property You Own or Have an Interest In. Lis | t any real estate in Part 1. | |
| No. Go to Part 6. Yes. Go to line 38. Art 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No | . Do you | own or have any legal or equitable interest in any business-related property | n? | |
| Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No | | | | |
| If you own or have an interest in farmland, list it in Part 1. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No | ☐ Yes. | Go to line 38. | | |
| No. Go to Part 7. Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 3. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No | | | ave an Interest In. | |
| Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 3. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No | 6. Do yo | u own or have any legal or equitable interest in any farm- or com | mercial fishing-related property? | |
| Describe All Property You Own or Have an Interest in That You Did Not List Above 3. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No | ■ No | . Go to Part 7. | | |
| B. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No | ☐ Ye | s. Go to line 47. | | |
| Examples: Season tickets, country club membership No | Part 7: | Describe All Property You Own or Have an Interest in That You Did Not I | List Above | |
| | Exam | | | |
| — · · · · · · · · · · · · · · · · · · · | | . Give specific information | | |
| 54. Add the dollar value of all of your entries from Part 7. Write that number here | 54. Add | the dollar value of all of your entries from Part 7. Write that numl | per here | \$0.00 |

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| Debtor 1 | Karrine K. Gatenby | | | Case number (if known) | | |
|-----------------|--|-----|-------------|------------------------------|-------------|--|
| Part 8: | List the Totals of Each Part of this Form | | | | | |
| 55. Pa r | rt 1: Total real estate, line 2 | | | | \$0.00 | |
| 56. Pa ı | rt 2: Total vehicles, line 5 | _ | \$14,000.00 | | | |
| 57. Pa r | rt 3: Total personal and household items, line 15 | _ | \$2,310.00 | | | |
| 58. Pa r | rt 4: Total financial assets, line 36 | | \$8,533.00 | | | |
| 59. Pa r | rt 5: Total business-related property, line 45 | | \$0.00 | | | |
| 60. Pa r | rt 6: Total farm- and fishing-related property, line 52 | | \$0.00 | | | |
| 61. Pa r | rt 7: Total other property not listed, line 54 | + _ | \$0.00 | | | |
| 62. Tot | tal personal property. Add lines 56 through 61 | _ | \$24,843.00 | Copy personal property total | \$24,843.00 | |
| 63. Tot | tal of all property on Schedule A/B. Add line 55 + line 62 | | | | \$24,843.00 | |

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| Fill in this information to identify your case: | | | | | | |
|---|-------------------------|-------------------|-------------|---|--------------------------------------|--|
| Debtor 1 | Karrine K. Gatenby | / | | | | |
| | First Name | Middle Name | Last Name | _ | | |
| Debtor 2 | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Ba | nkruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | | |
| Case number | | | | | | |
| (if known) | | | | | ☐ Check if this is an amended filing | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from | Amount of the exemption you claim Specific laws that allow exemption Check only one box for each exemption. |
|--|---|---|
| 1997 Toyota Camry 200,000 miles Line from <i>Schedule A/B</i> : 3.2 | \$1,000.00 | \$1,000.00 735 ILCS 5/12-1001(c) 100% of fair market value, up to any applicable statutory limit |
| Kitchen table, small kitchen utensils and appliances, 2 desks, 3 adult beds, 1 couch, 2 sitting chairs, 5 dressers, 3 bookshelves, 3 side/end tables, bbq grill, etc Line from <i>Schedule A/B</i> : 6.1 | \$1,200.00 | \$1,200.00 735 ILCS 5/12-1001(b) 100% of fair market value, up to any applicable statutory limit |
| 3 TVs, dvd player, bluray player and laptop computer Line from <i>Schedule A/B</i> : 7.1 | \$500.00 | \$500.00 735 ILCS 5/12-1001(b) 100% of fair market value, up to any applicable statutory limit |
| Clothes and shoes Line from <i>Schedule A/B</i> : 11.1 | \$500.00 | \$500.00 735 ILCS 5/12-1001(a) 100% of fair market value, up to any applicable statutory limit |
| Costume jewelry Line from <i>Schedule A/B</i> : 12.1 | \$100.00 | \$100.00 735 ILCS 5/12-1001(b) 100% of fair market value, up to any applicable statutory limit |

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| otor 1 Karrine K. Gatenby | | | Case number (if known) | |
|--|--------------------------------------|--|---|------------------------------------|
| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | and the state of t | | Specific laws that allow exemption |
| | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | |
| 2 Cats and 1 Dog Line from <i>Schedule A/B</i> : 13.1 | \$10.00 | | \$10.00 | 735 ILCS 5/12-1001(b) |
| | | | 100% of fair market value, up to any applicable statutory limit | |
| Checking Account: Fifth Third Bank Line from Schedule A/B: 17.1 | \$1,663.00 | | \$1,663.00 | 735 ILCS 5/12-1001(b) |
| Ellie Holli Gonedale 775. 17.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| 401(k): JP Morgan Retirement Plan Services | \$4,570.00 | | \$4,570.00 | 735 ILCS 5/12-1006 |
| Line from Schedule A/B: 21.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Pension: JP Morgan Chase Retirement Debtor will receive \$137.00 per month | Unknown | | | 735 ILCS 5/12-1006 |
| upon retirement Line from Schedule A/B: 21.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| Federal Tax Refund: 2015 Anticipated Tax Refund | \$1,200.00 | | \$527.00 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 28.1 | | | 100% of fair market value, up to any applicable statutory limit | |

- Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
 - No
 - Yes

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| Fill in this information to ide | ntify your case: | | | | |
|---|---------------------------------|---------------------------------------|-----------------------------|--|--------------------------|
| | | | | | |
| Debtor 1 Karrine K | . Gatenby Middle Na | ame Last Name | | | |
| Debtor 2 | Wildale No | and Last Name | | | |
| (Spouse if, filing) First Name | Middle Na | ame Last Name | | | |
| United States Bankruptcy Cour | rt for the: NORTHERN | I DISTRICT OF ILLINOIS | | | |
| 0 | | | | | |
| Case number | | _ | | ☐ Check | if this is an |
| | | | | | ded filing |
| 000 | | | | | |
| Official Form 106D | | | | | |
| Schedule D: Cred | litors Who Hav | ve Claims Secur | ed by Property | <u>/</u> | 12/15 |
| Be as complete and accurate as preeded, copy the Additional Page, known). | | | | | |
| 1. Do any creditors have claims se | cured by your property? | | | | |
| ☐ No. Check this box and | submit this form to the c | ourt with your other schedules | s. You have nothing else to | o report on this form. | |
| Yes. Fill in all of the info | ormation below. | | | | |
| Part 1: List All Secured Cla | aims | | | | |
| 2. List all secured claims. If a cred | | red claim, list the creditor separate | ely for | Column B | Column C |
| each claim. If more than one credite as possible, list the claims in alphab | or has a particular claim, list | the other creditors in Part 2. As mu | | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 Jeff Mahovski | Describe the pro | operty that secures the claim: | \$0.00 | \$0.00 | \$0.00 |
| Creditor's Name | Debtor is leas Accent from t | sing 2014 Hyundai friend | | | |
| 1054 South Hampton I | As of the date yo | ou file, the claim is: Check all that | J | | |
| 1054 South Hampton I Round Lake, IL 60073 | арріў. | | | | |
| Number, Street, City, State & Zip | | | | | |
| Hamber, Street, Sity, State & Elp | Disputed | | | | |
| Who owes the debt? Check one | • | Check all that apply. | | | |
| Debtor 1 only | An agreemen | t you made (such as mortgage or | secured | | |
| ☐ Debtor 2 only | car loan) | | | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien | (such as tax lien, mechanic's lien) | | | |
| At least one of the debtors and a | _ ~ | | | | |
| ☐ Check if this claim relates to a community debt | a ☐ Other (includi | ng a right to offset) | | | |
| Date debt was incurred 2015 | Last 4 dig | gits of account number | | | |
| 2.2 Toyota Motor Credit Co | Orn Describe the pro | operty that secures the claim: | \$20,000.00 | \$13,000.00 | \$7,000.00 |
| Creditor's Name | | Prius 55,000 miles | 1 | <u> </u> | Ψ.,σσσ.σσ |
| | | ssessed by creditor | | | |
| Toyota Financial Servi | ces 12/29/2015 | | | | |
| P.O. Box 8026 | As of the date yo apply. | ou file, the claim is: Check all that | | | |
| Cedar Rapids, IA 5240 | 08 | | | | |
| Number, Street, City, State & Zip | | | | | |
| W 1140 or 1 | Disputed | | | | |
| Who owes the debt? Check one | _ | Check all that apply. | | | |
| Debtor 1 only | An agreemen car loan) | t you made (such as mortgage or | secured | | |
| Debtor 2 only | | | | | |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and a | <u>—</u> | (such as tax lien, mechanic's lien) | | | |
| ☐ Check if this claim relates to a community debt | ~ | ng a right to offset) Car Loar | 1 | | |
| community dept | | | | | |
| Opene Date debt was incurred 7/01/1 | | nits of account number 000 | 1 | | |
| Date debt was incurred 7/01/1 | Last 4 010 | gits of account number 000 | <u>•</u> | | |

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| Debtor | Karrine K. Gatenby | | | Case number (if know) | | |
|------------|---|--|-------------------------------|---|------------------------|---------------|
| | First Name | Middle Name | Last Name | | | |
| | | | | | | |
| Add th | ne dollar value of yo | our entries in Column A on th | his page. Write that numb | er here: \$20,000.00 | | |
| | is the last page of y that number here: | your form, add the dollar val | ue totals from all pages. | \$20,000.00 | | |
| Part 2: | List Others to | Be Notified for a Debt Th | at You Already Listed | | | |
| to collect | ct from you for a de | bt you owe to someone else s that you listed in Part 1, lis | , list the creditor in Part 1 | lebt that you already listed in Part 1. For exan , and then list the collection agency here. Sim here. If you do not have additional persons to | nilarly, if you have r | nore than one |
| N | Name Address | | | | | |
| | Toyota Financial | Services | 0 | n which line in Part 1 did you enter | the creditor? | 2.2 |
| - | P.O. Box 5855 Carol Stream, IL | . 60197 | Li | ast 4 digits of account number | 8450 | |

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| | oddinont 1 ago 20 or 00 | |
|---|---|--|
| Fill in this information to identify your case: | | |
| Debtor 1 Karrine K. Gatenby | | |
| First Name Middle | Name Last Name | |
| Debtor 2 | | |
| (Spouse if, filing) First Name Middle | Name Last Name | |
| United States Bankruptcy Court for the: NORTHER | RN DISTRICT OF ILLINOIS | |
| Case number | | |
| (if known) | | ☐ Check if this is an |
| | | amended filing |
| Official Form 106E/F | | |
| | Lincoured Claims | 12/15 |
| Schedule E/F: Creditors Who Have | editors with PRIORITY claims and Part 2 for creditors with NONP | |
| D: Creditors Who Have Claims Secured by Property. If mon the Continuation Page to this page. If you have no informat number (if known). | official Form 106G). Do not include any creditors with partially see space is needed, copy the Part you need, fill it out, number the ion to report in a Part, do not file that Part. On the top of any add | entries in the boxes on the left. Attach |
| Part 1: List All of Your PRIORITY Unsecured Cla | | |
| Do any creditors have priority unsecured claims again | st you? | |
| No. Go to Part 2. | | |
| Yes. | | |
| Part 2: List All of Your NONPRIORITY Unsecure | | |
| Do any creditors have nonpriority unsecured claims a | gainst you? | |
| ☐ No. You have nothing to report in this part. Submit this | form to the court with your other schedules. | |
| Yes. | | |
| claim, list the creditor separately for each claim. For each | habetical order of the creditor who holds each claim. If a creditor claim listed, identify what type of claim it is. Do not list claims already Part 3.If you have more than three nonpriority unsecured claims fill ou | included in Part 1. If more than one |
| | | Total claim |
| 4.1 Advocate Good Shepherd Hospital | Last 4 digits of account number 7246 | \$620.23 |
| Nonpriority Creditor's Name | When we the debt in some 40 | |
| P.O. Box 3039 Hinsdale, IL 60522 | When was the debt incurred? | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | ☐ Contingent | |
| ■ Debtor 1 only | ☐ Unliquidated | |
| Debtor 2 only | ☐ Disputed | |
| ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| ☐ At least one of the debtors and another | ☐ Student loans | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce the report as priority claims | at you did not |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | S |
| Yes | ■ Other. Specify Medical | |
| | | |

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| Debtor 1 Karrine K. Gatenby | | Case number (if know) | | | | |
|-----------------------------|---|---|--|------------|--|--|
| 4.2 | Advocate Medical Group Nonpriority Creditor's Name 8550 West Bryn Mawr Avenue 8th Floor | Last 4 digits of account number When was the debt incurred? | 2408 | \$114.63 | | |
| | Chicago, IL 60631 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is | s: Check all that apply | | | |
| | ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only | ☐ Unliquidated ☐ Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured ☐ Student loans | claim: | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? — | report as priority claims | ration agreement or divorce that you did not | | | |
| | ■ No □ Yes | ☐ Debts to pension or profit-sharing ☐ Other. Specify Medical | g pians, and other similar debts | - | | |
| 4.3 | AT&T Mobility Nonpriority Creditor's Name | Last 4 digits of account number | 1899 | \$3,354.00 | | |
| | P.O. Box 6416 Carol Stream, IL 60197 Number Street City State Zlp Code | When was the debt incurred? As of the date you file, the claim is | 2015 | | | |
| | Who incurred the debt? Check one. ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only | ☐ Contingent ☐ Unliquidated ☐ Disputed | | | | |
| | ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | | | |
| | Is the claim subject to offset? ■ No □ Yes | report as priority claims Debts to pension or profit-sharing Other Specify Services | g plans, and other similar debts | | | |
| | 165 | Other. Specify Services | | - | | |
| 4.4 | AT&T Uverse Nonpriority Creditor's Name PO Box 6014 Carol Stream, IL 60197 | Last 4 digits of account number When was the debt incurred? | 2015 | \$725.00 | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is | s: Check all that apply | | | |
| | ■ Debtor 1 only □ Debtor 2 only | ☐ Unliquidated ☐ Disputed | | | | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | claim: | | | |
| | ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | | | |
| | ■ No □ Yes | ☐ Debts to pension or profit-sharing ☐ Other. Specify Services | g plans, and other similar debts | | | |
| | | | | | | |

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| Debtor | 1 Karrine K. Gatenby | | Case number (if know) | |
|--------|---|---|--|------------|
| 4.5 | Avant Inc. Nonpriority Creditor's Name | Last 4 digits of account number | 3644 | \$800.00 |
| | 640 N. Lasalle St. | When was the debt incurred? | Opened 10/01/14 | _ |
| | Chicago, IL 60654 Number Street City State Zlp Code | As of the date you file, the claim is | s: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | Debtor 1 only | ☐ Unliquidated | | |
| | ☐ Debtor 2 only | ☐ Disputed | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | I claim: | |
| | At least one of the debtors and another | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | ☐ Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | ■ Other. Specify Unsecured | | - |
| 4.6 | Capital One | Last 4 digits of account number | 1594 | \$3,248.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy P.O. Box 30285 | When was the debt incurred? | Opened 9/01/08 | - |
| | Salt Lake City, UT 84130 | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | |
| | Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | ☐ Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | ■ Other. Specify Credit Card | | - |
| 4.7 | Consumer Financial Services | Last 4 digits of account number | 3227 | \$1,500.00 |
| | Nonpriority Creditor's Name c/o Jason S. Harris, LLC 300 Saunders Rd. Suite 100 | When was the debt incurred? | 2015 | - |
| | Riverwoods, IL 60015 Number Street City State Zlp Code | As of the date you file, the claim is | s: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | | |
| | Debtor 1 only | ☐ Unliquidated | | |
| | Debtor 2 only | ☐ Disputed | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | |
| | _ | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? — | report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | ☐ Debts to pension or profit-sharing | • • | |
| | Yes | ■ Other. Specify Money Ioan | ed | _ |

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| Debtor 1 Karrine K. Gatenby | | Case number (if know) | |
|-----------------------------|---|---|------------|
| 4.8 | Credit One Bank N.A. Nonpriority Creditor's Name | Last 4 digits of account number 1939 | \$927.00 |
| | P.O. Box 98873 | When was the debt incurred? Opened 8/22/12 | |
| | Las Vegas, NV 89193 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | _ | |
| | Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| | ☐ At least one of the debtors and another | ☐ Student loans | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Credit Card | |
| 4.9 | Harris & Harris, Ltd. Nonpriority Creditor's Name | Last 4 digits of account number | \$0.00 |
| | 222 Merchandise Mart Plaza Suite 1900 Chicago, IL 60654 | When was the debt incurred? 2013 | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | |
| | Debtor 1 only | ☐ Unliquidated | |
| | ☐ Debtor 2 only | ☐ Disputed | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | ☐ Student loans | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify Notice only | |
| 4.10 | Malcolm S. Gerald & Associates, Inc Nonpriority Creditor's Name | Last 4 digits of account number 4141 | \$1,537.45 |
| | 332 South Michigan Avenue Suite 600 | When was the debt incurred? | |
| | Chicago, IL 60604 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: ☐ Student loans | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Collection for Alexian Brothers Behavioral Health Hospital | |

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| Debtor | 1 Karrine K. Gatenby | Case number (if know) | |
|--------|---|---|------------|
| 4.11 | Mark Walker and Dorine Walker Nonpriority Creditor's Name | Last 4 digits of account number | \$8,000.00 |
| | 803 Surrey Lane Algonquin, IL 60102 | When was the debt incurred? 2014 | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | |
| | Debtor 1 only | ☐ Unliquidated | |
| | Debtor 2 only | ☐ Disputed | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | ☐ Student loans | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Unsecured Ioan | |
| 4.12 | Medical Business Bureau Nonpriority Creditor's Name | Last 4 digits of account number 0002 | \$148.00 |
| | P.O. Box 1219 Park Ridge, IL 60068 | When was the debt incurred? Opened 7/01/15 L | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | ☐ Contingent | |
| | Debtor 1 only | ☐ Unliquidated | |
| | Debtor 2 only | ☐ Disputed | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | ☐ Student loans | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Collection Attorney Medical | |
| 4.13 | Midland Funding | Last 4 digits of account number 1761 | \$927.00 |
| | Nonpriority Creditor's Name 2635 Northside Dr. Ste. 300 San Diego, CA 92108 | When was the debt incurred? Opened 6/01/15 | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community debt | Student loans | |
| | Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify | |

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| Debtor | 1 Karrine K. Gatenby | Case number (if know) | | | | |
|--------|---|---|--|------------|--|--|
| 4.14 | Northwest Collectors Nonpriority Creditor's Name | Last 4 digits of account number | 1656 | \$218.00 | | |
| | 3601 Algonquin Rd. Suite 232 Rolling Meadows, IL 60008 | When was the debt incurred? | Opened 9/01/15 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is | s: Check all that apply | | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | | |
| | Debtor 1 only | ☐ Unliquidated | | | | |
| | Debtor 2 only | □ Disputed | | | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured | l claim: | | | |
| | ☐ At least one of the debtors and another | ☐ Student loans | | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | |
| | Yes | ■ Other. Specify Collection A | attorney Cary School District 26 | | | |
| 4.15 | Oac | Last 4 digits of account number | 4579 | \$12.35 | | |
| | Nonpriority Creditor's Name P.O. Box 500 Baraboo, WI 53913 | When was the debt incurred? | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is | s: Check all that apply | | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | | |
| | ■ Debtor 1 only | | | | | |
| | ☐ Debtor 2 only | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | | | | |
| | ☐ At least one of the debtors and another | ☐ Student loans | | | | |
| | ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a sepa | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | |
| | ■ No | ☐ Debts to pension or profit-sharing | | | | |
| | Yes | ■ Other. Specify Collection for | or Wellington Radiology Group | | | |
| 4.16 | Springleaf Financial Services | Last 4 digits of account number | 6802 | \$4,381.00 | | |
| | Nonpriority Creditor's Name 601 NW 2nd St. | When was the debt incurred? | Opened 4/01/14 Last Active 2/28/15 | | | |
| | Evansville, IN 47708 Number Street City State Zlp Code | As of the date you file, the claim is | | | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | | |
| | Debtor 1 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 2 only | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | | | | | |
| | ☐ At least one of the debtors and another | east one of the debtors and another Student loans | | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | | | | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | Yes | ■ Other. Specify Money Loar | ned | | | |

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| Debto | Karrine K. Gatenby | | Case number (if know) | | | | | |
|----------------|--|---|---|---------------------------|--|--|--|--|
| 4.17 | Stellar Recovery Inc. | Last 4 digits of account number | 6759 | \$95.00 | | | | |
| | Nonpriority Creditor's Name 1327 Hwy 2 W | When was the debt incurred? | Opened 8/01/15 | _ | | | | |
| | Kalispell, MT 59901 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | | | | |
| | Who incurred the debt? Check one. | _ | or chook an inat apply | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | |
| | ☐ Debtor 2 only | or 2 only | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecure | | | | | | |
| | ☐ At least one of the debtors and another | ☐ Student loans | | | | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | | | | |
| | ■ No | ☐ Debts to pension or profit-sharing | ng plans, and other similar debts | | | | | |
| | Yes | ■ Other. Specify Collection | Attorney Comcast | - | | | | |
| 4.18 | Take Charge America | Last 4 digits of account number | | \$0.00 | | | | |
| | Nonpriority Creditor's Name | _ | | Ψ0.00 | | | | |
| | 20620 N. 19th Ave Phoenix, AZ 85027 | When was the debt incurred? | 2013-2014 | - | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | | | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | | | | |
| | Debtor 1 only | ☐ Unliquidated | | | | | | |
| | Debtor 2 only | ☐ Disputed | ☐ Disputed | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: ☐ Student loans | | | | | | |
| | At least one of the debtors and another | | | | | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | | | | | | |
| | Yes | ■ Other. Specify Consolidati | on program | - | | | | |
| 4.19 | Tri-County Emergency Physician Nonpriority Creditor's Name | Last 4 digits of account number | 9813 | \$15.65 | | | | |
| | P.O. Box 98 | When was the debt incurred? | 05/11/2015 | | | | | |
| | Barrington, IL 60011 | | | - | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | |
| | Debtor 1 and Debtor 2 only | Disputed | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure ☐ Student loans | d claim: | | | | | |
| | ☐ Check if this claim is for a community debt | Obligations arising out of a sepa | aration agreement or divorce that you did not | | | | | |
| | Is the claim subject to offset? | report as priority claims Debts to pension or profit-sharir | og plane, and other similar debte | | | | | |
| | ■ No | · | ig plans, and other similar debts | | | | | |
| | ☐ Yes | ■ Other. Specify Medical | | - | | | | |
| Part 3 | List Others to Be Notified About a Deb | ot That You Already Listed | | | | | | |
| trying more | his page only if you have others to be notified ab g to collect from you for a debt you owe to somed than one creditor for any of the debts that you li lebts in Parts 1 or 2, do not fill out or submit this | one else, list the original creditor in Pa sted in Parts 1 or 2, list the additional | irts 1 or 2, then list the collection agency her | e. Similarly, if you have | | | | |
| | | On which entry in Part 1 or Part 2 did you | _ | | | | | |
| | cate Good Shepherd Box 4248 | | Part 1: Creditors with Priority Unsecured Clai | | | | | |
| - | Stream, IL 60197 | • | Part 2: Creditors with Nonpriority Unsecured | Claims | | | | |
| | | Last 4 digits of account number | | | | | | |

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| Debtor 1 Karrine K. Gatenby | | Case number (if know) |
|---|---|--|
| Name and Address Alexian Brothers Health Hospital 21272 Network Place | On which entry in Part 1 or Part 2 did Line 4.10 of (<i>Check one</i>): | d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Chicago, IL 60673 | Last 4 digits of account number | 8135 |
| Name and Address Capital One P.O. Box 6492 Carol Stream, IL 60197 | On which entry in Part 1 or Part 2 did Line 4.6 of (<i>Check one</i>): Last 4 digits of account number | d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 1594 |
| Name and Address Cary Junior High 2109 Crystal Lake Road Cary, IL 60013 | On which entry in Part 1 or Part 2 did Line 4.14 of (<i>Check one</i>): Last 4 digits of account number | d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 7822 |
| Name and Address Consumer Financial Services 300 South Green Bay Rd. Waukegan, IL 60085 | On which entry in Part 1 or Part 2 did Line 4.7 of (<i>Check one</i>): Last 4 digits of account number | d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 2401 |
| Name and Address FMA Alliance, Ltd. P.O. Box 2409 Houston, TX 77252 | On which entry in Part 1 or Part 2 did Line 4.16 of (<i>Check one</i>): Last 4 digits of account number | d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 3877 |
| Name and Address Harris & Harris Ltd. 111 West Jackson Boulevard Suite 400 Chicago, IL 60604-4134 | On which entry in Part 1 or Part 2 did Line 4.1 of (<i>Check one</i>): Last 4 digits of account number | d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 5433 |
| Name and Address Medical Business Bureau, LLC P.O. Box 1219 Park Ridge, IL 60068 | On which entry in Part 1 or Part 2 did Line 4.19 of (<i>Check one</i>): Last 4 digits of account number | d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 1566 |
| Name and Address Midland Credit Management 8875 Aero Drive Suite 200 San Diego, CA 92123 | On which entry in Part 1 or Part 2 did Line $\frac{4.13}{4.13}$ of (Check one): | d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 1761 |
| Name and Address Take Charge America P.O. Box 83330 Phoenix, AZ 85071 | On which entry in Part 1 or Part 2 did Line 4.6 of (<i>Check one</i>): Last 4 digits of account number | d you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 8792 |
| | | |

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| Total claims |
|--------------|
| from Part 1 |
| |

| | | | | l otal claim |
|-----|---|-----|------|--------------|
| 6a. | Domestic support obligations | 6a. | \$_ | 0.00 |
| 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ - | 0.00 |
| 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |

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| Debtor 1 K | arrine K. | Gatenby | Case n | umber (if know) | | |
|--------------|-------------------|--|------------|-----------------|---------------------------|--|
| | 6e. | Total. Add lines 6a through 6d. | 6e. | \$ | 0.00 | |
| Total claims | 6f. | Student loans | 6f. | Total Claim | 0.00 | |
| from Part 2 | 6g. 6h. 6i. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Add all other nonpriority unsecured claims. Write that amount here. | 6g. 6h. | \$ \$ | 0.00 0.00 26,623.31 | |
| | 6j. | Total. Add lines 6f through 6i. | 6j. | \$ | 26,623.31 | |

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| Fill in this information to identify your case: | | | | | | | |
|---|--------------------------|-------------------|-------------|--|-----------------------|--|--|
| Debtor 1 | Karrine K. Gatenb | у | | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | | |
| United States B | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | | | |
| Case number | | | | | ☐ Check if this is an | | |
| | | | | | amended filing | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for |
|-----|---|--|
| 2.1 | Jeff Mahovski 1054 South Hampton Drive Round Lake, IL 60073 | Debtor is leasing 2014 Hyundai Accent from friend and paying \$210.00 per month for use of the vehicle and an additional \$60.00 per month for auto insurance. |
| 2.2 | Revere Real Estate | Lease for residence. Lease expires April, 2016 |

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| | | | 3.5 | | |
|---------------------------------------|--|---|---|--|--|
| Fill in thi | s information to identify yo | our case: | | | |
| Debtor 1 | Karrine K. Gate | nby | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, f | First Name | Middle Name | Last Name | | |
| United St | ates Bankruptcy Court for the | e: NORTHERN DISTRICT | OF ILLINOIS | | |
| Case nur | nber | | | | ☐ Check if this is an |
| | | | | | amended filing |
| Officia | al Form 106H | | | | |
| | dule H: Your Co | debtors | | | 12/15 |
| | <u> </u> | | | | 12.10 |
| people ar fill it out, your nam | e filing together, both are e and number the entries in e and case number (if knov | equally responsible for sup | plying correct informa h the Additional Page | tion. If more space is to this page. On the t | rate as possible. If two married needed, copy the Additional Page, op of any Additional Pages, write |
| _ | | | · | | |
| ■ No | | | | | |
| | | you lived in a community p ana, Nevada, New Mexico, Pu | | | rty states and territories include |
| _ | | , | | | • |
| _ | o. Go to line 3. | spouse, or legal equivalent liv | e with you at the time? | | |
| | os. Dia your spouse, former s | spouse, or legal equivalent in | e with you at the time: | | |
| in lir Forn | e 2 again as a codebtor on | lly if that person is a guarar | ntor or cosigner. Make | sure you have listed | ng with you. List the person shown the creditor on Schedule D (Officia), Schedule E/F, or Schedule G to |
| | Column 1: Your codebtor Name, Number, Street, City, State ar | nd ZIP Code | | Column 2: The cr Check all schedu | reditor to whom you owe the debt les that apply: |
| 3.1 | | | | ☐ Schedule D, li | ne |
| [01.] | Name | | | ☐ Schedule E/F, | |
| | | | | ☐ Schedule G, li | ne |
| | Number Street City | State | ZIP Code | | |
| 3.2 | | | | ☐ Schedule D, li | ne |
| | Name | | | □ Schedule E/F, | line |
| | | | | ☐ Schedule G, li | ne |
| | Number Street City | State | ZIP Code | _ | |
| | | | | | |

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| Fill | in this information to identi | fy your ca | ase. | | | | | | | | |
|-----------------|---|---------------------------------|--|---|-------------------------|--------------|----------------|--|--|-------------------------------|---|
| | | ne K. Ga | | | | | | | | | |
| | otor 2 | | | | | | _ | | | | |
| Uni | ted States Bankruptcy Cou | urt for the: | NORTHERN DISTRIC | T OF ILLINOIS | 3 | | | | | | |
| Of Be a suppose | fficial Form 106 chedule I: You as complete and accurate plying correct information use. If you are separated ch a separate sheet to thi | r Inco | ible. If two married pec are married and not fili r spouse is not filing w | ng jointly, and ith you, do not | your spou include in | se i fori | is liv mati | 13 income MM / DD/ and Debtor 2), being with you, income about your specific properties. | ed filing ent showing as of the YYYY oth are ecclude informations. If n | rmation abou nore space is | 12/15 sible for t your needed, |
| Par | Describe Employment | | | | | | | | | | |
| • | information. | - | | Debtor 1 | | | | | | filing spouse | |
| | If you have more than one job, attach a separate page with information about additional employers. | vith | Employment status | ■ Employed□ Not employed | | | | ☐ Employed ☐ Not employed | | | |
| | | nal | Occupation | Production | | | | | , , | | |
| | Include part-time, seasor self-employed work. | nal, or | Employer's name | RR Donnell | | | | | | | |
| | Occupation may include or homemaker, if it applies | | Employer's address | 168 East Hi Elgin, IL 60 | | enı | ue | | | | |
| | | | How long employed the | here? 9 y | ears/ | | | | | | |
| Par | t 2: Give Details Ab | out Mon | thly Income | | | | | | | | |
| | mate monthly income as use unless you are separat | | ate you file this form. If | you have nothir | ng to report | for | any | line, write \$0 in th | e space. I | nclude your no | on-filing |
| - | u or your non-filing spouse e space, attach a separate | | | ombine the info | rmation for | all e | empl | oyers for that pers | son on the | lines below. If | you need |
| | | | | | | | | For Debtor 1 | | ebtor 2 or ling spouse | |
| 2. | List monthly gross wag deductions). If not paid r | jes, salar monthly, c | ry, and commissions (be calculate what the month | efore all payroll ly wage would b | pe. | 2. | \$ | 5,440.00 | \$ | N/A | |
| 3. | Estimate and list month | nly overti | me pay. | | ; | 3. | +\$ | 0.00 | +\$ | N/A | |
| 4. | Calculate gross Income | e. Add lin | e 2 + line 3. | | | 4. | \$ | 5,440.00 | \$ | N/A | |

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| Deb | tor 1 | Karrine K. Gatenby | _ | Case r | number (if known) | | |
|-----|---------------------------|--|-------------------|----------------|--------------------|----------|----------------------------|
| | | | | For | Debtor 1 | | ebtor 2 or ling spouse |
| | Col | by line 4 here | 4. | \$ | 5,440.00 | \$ | N/A |
| 5. | Lis | all payroll deductions: | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | 1,097.00 | \$ | N/A |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$ | 0.00 | \$ | N/A |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | 0.00 | \$ | N/A |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$ | 83.00 | \$ | N/A |
| | 5e. | Insurance | 5e. | \$ | 347.00 | \$ | N/A |
| | 5f. | Domestic support obligations | 5f. | \$ | 0.00 | \$ | N/A |
| | 5g. | Union dues | 5g. | \$ | 0.00 | \$ | N/A |
| | 5h. | Other deductions. Specify: | 5h.+ | · \$ | 0.00 | + \$ | N/A |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 1,527.00 | \$ | N/A |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 3,913.00 | \$ | N/A |
| 8. | Lis : 8a. | t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | |
| | | monthly net income. | 8a. | \$ | 0.00 | \$ | N/A |
| | 8b. | Interest and dividends | 8b. | \$ | 0.00 | \$ | N/A |
| | 8c. 8d. 8e. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security | 8c. 8d. 8e. | \$ \$ \$ | 425.00 | \$ \$ | N/A N/A |
| | | • | œ. | Φ | 0.00 | Φ | N/A |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | \$ | 0.00 | \$ | N/A |
| | 8g. | Pension or retirement income | 8g. | \$ | 0.00 | \$ | N/A |
| | 8h. | Other monthly income. Specify: | 8h.+ | · \$ | 0.00 | + \$ | N/A |
| 9. | Add | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 425.00 | \$ | N/A |
| 10 | Cal | culate monthly income. Add line 7 + line 9. | 10. \$ | | 1,338.00 + \$ | | N/A = \$ 4,338.00 |
| | | If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | ΙΟ. Φ | | F,550.00 - + _ | | 14/A - 4,550.00 |
| 11. | Sta Incl othe Do | te all other regular contributions to the expenses that you list in <i>Schedule</i> ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not exify: | deper | | • | | thedule J. 11. +\$ 0.00 |
| 12. | | If the amount in the last column of line 10 to the amount in line 11. The rest te that amount on the Summary of Schedules and Statistical Summary of Certailies | | | | | 12. \$ 4,338.00 |
| | | | | | | | Combined monthly income |
| 13. | Do | you expect an increase or decrease within the year after you file this form No. | ? | | | | • |
| | $\overline{}$ | Yes Explain: | | | | | |

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| Debtor 1 Karrine K. Gatenby | Fill | in this information to identify your case: | | | | | |
|--|------|--|--|----------------------------|--|--|--|
| Debtor 2 (Spoorate, Iff lifting) | Deb | Karrine K. Gatenby | | | | | |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (If known) Official Form 106J | 1 | | | | A supplement show | | |
| Case number (If known) Continued Cont | (Spo | ouse, if filing) | | • | 13 expenses as of | the following date: | |
| Official Form 106J Schedule J: Your Expenses Schedule J: Your Expenses Schedule J: Your Expenses Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. By this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No. Do not list Debtor 1 Yes. Fill out this information for and Debtor 2. Do not state the dependents? Do not state the dependents names. Daughter Daughter 15. Yes. Son 18. Yes. Son 18. Yes. Ano No. No. No. No. No. No. No. N | Unit | ed States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLING | OIS | Ī | MM / DD / YYYY | | |
| Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. In this point case? | | | | | | | |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Ran 1: | | | | | | | |
| 1. Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No. Do you have dependents? No. Do not list Debtor 1 | Be | as complete and accurate as possible. If two married people ar ormation. If more space is needed, attach another sheet to this | | | | or supplying correct | |
| Yes. Does Debtor 2 live in a separate household? No | | | | | | | |
| Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? | | | | | | | |
| Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Son 18 Yes No Yes No Yes Doughter 15 Yes No No Yes No No Yes Stimate Your Ongoing Monthly Expenses Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4c. \$ 20.00 4c. Home maintenance, repair, and upkeep expenses | | = 1.1- | for Separate House | ehold of Deb | tor 2. | | |
| Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Son 18 Yes No Yes No Yes Doughter 15 Yes No No Yes No No Yes Stimate Your Ongoing Monthly Expenses Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4c. \$ 20.00 4c. Home maintenance, repair, and upkeep expenses | 2. | Do you have dependents? ☐ No | - | | | | |
| Daughter 15 Yes Son 18 Yes No No No Yes | | Do not list Debtor 1 Yes Fill out this information for | | | • | | |
| Son 18 Yes No Yes No Yes 3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106i.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses | | | Daughter | | 15 | _ | |
| 3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: | | | | | | | |
| 3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4c. \$ 25.00 | | | Son | | 18 | | |
| 3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4c. \$ 0.00 | | | | | | = : : - | |
| 3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate Your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4c. \$ 20.00 | | | | | | | |
| expenses of people other than yourself and your dependents? Part 2: | | | | | | | |
| Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses | | expenses of people other than yourself and your dependents? | | | | | |
| the value of such assistance and have included it on Schedule I: Your Income (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses Your expenses 4. \$ 1,150.00 4. \$ 0.00 | Est | imate your expenses as of your bankruptcy filing date unless your benses as of a date after the bankruptcy is filed. If this is a supp | ou are using this fo lemental <i>Schedule</i> | orm as a su J, check th | pplement in a Cha le box at the top o | apter 13 case to report of the form and fill in the | |
| payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 1,150.00 4a. \$ 0.00 20.00 4b. \$ 25.00 | the | value of such assistance and have included it on Schedule I: Y | | | Your expe | enses | |
| 4a.Real estate taxes4a.\$0.004b.Property, homeowner's, or renter's insurance4b.\$20.004c.Home maintenance, repair, and upkeep expenses4c.\$25.00 | 4. | | nclude first mortgage | e 4. \$ | | 1,150.00 | |
| 4b. Property, homeowner's, or renter's insurance 4b. \$ 20.00 4c. Home maintenance, repair, and upkeep expenses 4c. \$ 25.00 | | If not included in line 4: | | | | | |
| 4b. Property, homeowner's, or renter's insurance 4b. \$ 20.00 4c. Home maintenance, repair, and upkeep expenses 4c. \$ 25.00 | | 4a. Real estate taxes | | 4a. \$ | | 0.00 | |
| | | | | | | | |
| | | | | | | | |

5. Additional mortgage payments for your residence, such as home equity loans

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| Deb | tor 1 Karrine K. Gatenby | Case num | nber (if known) | |
|----------|---|--------------|--|------------------------------|
| 6. | Utilities: | | | |
| ٥. | 6a. Electricity, heat, natural gas | 6a. | . \$ | 300.00 |
| | 6b. Water, sewer, garbage collection | 6b. | | 90.00 |
| | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | | 480.00 |
| | 6d. Other. Specify: | 6d. | | 0.00 |
| 7. | Food and housekeeping supplies | | . \$ | 800.00 |
| 7. 8. | Childcare and children's education costs | | | |
| _ | | 8. | | 45.00 |
| 9. | Clothing, laundry, and dry cleaning | 9. | | 100.00 |
| | Personal care products and services | 10. | · - | 100.00 |
| | Medical and dental expenses | 11. | . \$ | 180.00 |
| 12. | Transportation. Include gas, maintenance, bus or train fare. | 10 | ·r. | 200.00 |
| | Do not include car payments. | 12. | · | |
| | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | | 100.00 |
| | Charitable contributions and religious donations | 14. | . \$ | 0.00 |
| 15. | Insurance. | | | |
| | Do not include insurance deducted from your pay or included in lines 4 or 20. | | • | |
| | 15a. Life insurance | 15a. | · · | 0.00 |
| | 15b. Health insurance | 15b. | | 0.00 |
| | 15c. Vehicle insurance | 15c. | \$ | 260.00 |
| | 15d. Other insurance. Specify: | 15d. | . \$ | 0.00 |
| 16. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | | | |
| | Specify: | 16. | . \$ | 0.00 |
| 17. | Installment or lease payments: | | | |
| | 17a. Car payments for Vehicle 1 | 17a. | . \$ | 210.00 |
| | 17b. Car payments for Vehicle 2 | 17b. | . \$ | 0.00 |
| | 17a Other Specify | 17c. | \$ | 0.00 |
| | 17d. Other. Specify: | 17d. | · | 0.00 |
| 18 | Your payments of alimony, maintenance, and support that you did not report as | | | 0.00 |
| 10. | deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I). | | . \$ | 0.00 |
| 19. | Other payments you make to support others who do not live with you. | | \$ | 0.00 |
| | Specify: | 19. | · | 0.00 |
| 20. | Other real property expenses not included in lines 4 or 5 of this form or on Sch | | | |
| | 20a. Mortgages on other property | 20a. | | 0.00 |
| | 20b. Real estate taxes | 20b. | . \$ | 0.00 |
| | 20c. Property, homeowner's, or renter's insurance | 20c. | · | 0.00 |
| | 20d. Maintenance, repair, and upkeep expenses | 20d. | | 0.00 |
| | 20e. Homeowner's association or condominium dues | 20d. 20e. | | 0.00 |
| 04 | | | | |
| 21. | Other: Specify: Sports Activities for Children | 21. | . +\$ | 175.00 |
| | Pet Care | | +\$ | 50.00 |
| | Vehicle License Renewals | | +\$ | 20.00 |
| 22 | Calculate your monthly expenses | | | |
| 22. | 22a. Add lines 4 through 21. | | • | 4 205 00 |
| | • | | \$ | 4,305.00 |
| | 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| | 22c. Add line 22a and 22b. The result is your monthly expenses. | | \$ | 4,305.00 |
| 22 | Coloulate your monthly not income | | | |
| ۷۵. | Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. | 23a. | ¢ | 4 220 00 |
| | | | | 4,338.00 |
| | 23b. Copy your monthly expenses from line 22c above. | 23b. | 5 | 4,305.00 |
| | 22a Subtract your monthly expenses from your monthly income | | | |
| | 23c. Subtract your monthly expenses from your monthly income. | 23c. | \$ | 33.00 |
| | The result is your monthly net income. | _00. | <u>. </u> | |
| 24. | Do you expect an increase or decrease in your expenses within the year after your example, do you expect to finish paying for your car loan within the year or do you expect your modification to the terms of your mortgage? | | | ase or decrease because of a |
| | ■ No. | | | |
| | Yes. Explain here: | | | |
| | | | | |

| Fill in this infor | mation to identify your | case: | | | | |
|--|---|--------------------------|-------------|--------------------|-------------------|--|
| Debtor 1 | Karrine K. Gatenby | | | | | |
| Dahtan 0 | First Name | Middle Name | La | st Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | La | st Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINC | ois | | |
| Case number | | | | | | |
| (if known) | | | | | | ☐ Check if this is an amended filing |
| If two married p You must file th obtaining mone | eople are filing together | n connection with a banl | ensible for | supplying correct | information. | tement, concealing property, or 2000, or imprisonment for up to 20 |
| Sig | n Below | | | | | |
| Did you pa | ay or agree to pay some | one who is NOT an attor | ney to help | you fill out bank | ruptcy forms? | |
| ■ No | | | | | | |
| ☐ Yes. | Name of person | | | | | nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119) |
| | alty of perjury, I declare e true and correct. | that I have read the sum | mary and | schedules filed wi | ith this declarat | ion and |
| X /s/ Kar | rine K. Gatenby | | х | | | |
| Karrine | e K. Gatenby are of Debtor 1 | | ^_ | Signature of Deb | tor 2 | |
| Date | January 18, 2016 | | | Date | | |

| Fil | l in this inforr | nation to identify you | r case: | | | |
|------------------|---|---|---|---|---|---|
| De | ebtor 1 | Karrine K. Gaten | by Middle Name | Last Name | | |
| 1 - | ebtor 2 ouse if, filing) | First Name | Middle Name | Last Name | | |
| ` ' | | nkruptcy Court for the: | | | | |
| | | | | | | |
| | ase number | | | | | Check if this is an mended filing |
| | fficial Fo | | Affairs for Individ | luals Filing for B | ankruptcy | 12/15 |
| info | ormation. If m | ore space is needed n). Answer every que | , attach a separate sheet to | this form. On the top of an | equally responsible for su y additional pages, write yo | |
| _ | | | | a Lived Belofe | | |
| 1. | _ | r current marital statu | 1 5 f | | | |
| | ☐ Married■ Not mai | ried | | | | |
| 2. | | | lived anywhere other than | where you live now? | | |
| ۲. | _ | ast 5 years, nave you | iived anywhere other than | where you live now: | | |
| | □ No ■ Yes. Lis | t all of the places you | lived in the last 3 years. Do n | ot include where you live nov | v. | |
| | Debtor 1 Pr | ior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| | 64 Bright C Cary, IL 60 | | From-To: 12/2003-4/201 | ☐ Same as Debtor 1 | | ☐ Same as Debtor 1 From-To: |
| 3. sta | tes and territor | es include Arizona, Ca | | vada, New Mexico, Puerto R | nity property state or territorico, Texas, Washington and N | |
| Pa | rt 2 Explai | n the Sources of You | ır Income | | | |
| 4. | Fill in the tota | al amount of income yo | nployment or from operating the received from all jobs and a have income that you receive | all businesses, including part | | endar years? |
| | □ No | | | | | |
| | Yes. Fil | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$2,287.45 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

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| Debtor 1 Karrine K. Gatenby | | | | Case number (if known) | | | | | |
|-----------------------------|-----------------------------|-------------------------|--------------|--|--|---|--|-------------|---|
| | | | | | | | | | |
| | | | | Debtor 1 | | | Debtor 2 | | |
| | | | | Sources of income Check all that apply. | (befo | s income re deductions and sions) | Sources of inco | | Gross income (before deductions and exclusions) |
| Fo (Ja | r last calen anuary 1 to | dar year: December | 31, 2015) | ■ Wages, commissions, bonuses, tips | | \$65,285.56 | ☐ Wages, combonuses, tips | missions, | |
| | | | | ☐ Operating a business | | | ☐ Operating a b | ousiness | |
| | | dar year be December | | ■ Wages, commissions, bonuses, tips | | \$53,932.07 | ☐ Wages, combonuses, tips | missions, | |
| | | | | ☐ Operating a business | | | ☐ Operating a b | ousiness | |
| | List each | - | he gross inc | ou are filing a joint case and | | • | _ | - | e under Debtor 1. |
| | | | | Dobtos 1 | | | Dobtos 2 | | |
| | | | | Debtor 1 Sources of income Describe below | (befo | s income re deductions and sions) | Debtor 2 Sources of inco Describe below. | | Gross income (before deductions and exclusions) |
| | r last calen anuary 1 to | dar year: December | 31, 2015) | Child Support Cash Receipts | | \$3,565.50 | | | |
| | | dar year be December | | Child Support | | Unknown | | | |
| Pa | rt 3: List | : Certain Pa | yments You | ı Made Before You Filed fo | or Bankru | ptcy | | | |
| 6. | Are either ☐ No. | Neither De | btor 1 nor | 2's debts primarily consum Debtor 2 has primarily con a personal, family, or housel | sumer de | bts. Consumer deb | ts are defined in 11 | U.S.C. § 1 | 101(8) as "incurred by an |
| | | | 90 days bef | ore you filed for bankruptcy, | did you pa | ay any creditor a tota | al of \$6,225* or mo | re? | |
| | | □ No. | Go to line | 7. | | | | | |
| | | ☐ Yes | paid that c | each creditor to whom you p reditor. Do not include paym payments to an attorney for | ents for don the contract of t | omestic support obli ruptcy case. | gations, such as ch | nild suppor | t and alimony. Also, do |
| | _ | , | , | nt on 4/01/16 and every 3 ye | | | n or after the date o | ir adjustme | ent. |
| | ■ Yes. | | | or both have primarily con ore you filed for bankruptcy, | | | al of \$600 or more? | ı | |
| | | □ No. | Go to line | 7. | | | | | |
| | | ■ Yes | include pa | each creditor to whom you pyments for domestic support of this bankruptcy case. | | | | | |
| | Creditor' | s Name and | l Address | Dates of paym | nent | Total amount paid | Amount you still owe | Was this | payment for |

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Case number (if known)

| | Creditor's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Was this p | ayment for |
|-----|--|--|---|--|---|--|
| | Revere Real Estate | 10/2015-1/2015 | \$3,450.00 | \$0.00 | ☐ Mortgag ☐ Car ☐ Credit C ☐ Loan Re ☐ Supplier ☐ Other L residence | ard payment s or vendors ease for |
| 7. | Within 1 year before you filed for bankrupte Insiders include your relatives; any general particle corporations of which you are an officer, direct including one for a business you operate as a support and alimony. | rtners; relatives of any gentor, person in control, or o | neral partners; partne wner of 20% or more | erships of which ye of their voting se | ou are a gener curities; and a | ral partner; ny managing agent, |
| | □ No | | | | | |
| | Yes. List all payments to an insider | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment |
| | Mark Walker and Dorine Walker 803 Surrey Lane Algonquin, IL 60102 | 1/2015-1/2016 | \$3,912.00 | \$8,000.00 | | onthly loan of \$326.00 per |
| | ■ No □ Yes. List all payments to an insider Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | | this payment ditor's name |
| Pa | rt 4: Identify Legal Actions, Repossession | s, and Foreclosures | | | | |
| 9. | Within 1 year before you filed for bankrupt. List all such matters, including personal injury modifications, and contract disputes. No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of the | ne case |
| | Consumer Financial Services Corporation v. Karrine Gatenby 15 SC 3227 | Small claims/Collections | Circuit Court of Illinois 18 N Country St Waukegan, IL 6 | reet | ☐ Pending ☐ On appe ☐ Conclud | eal |
| | | | | | Judgment | entered |
| 10. | Within 1 year before you filed for bankrupt Check all that apply and fill in the details below | | erty repossessed, f | oreclosed, garni | shed, attache | d, seized, or levied? |
| | □ No | | | | | |
| | Yes. Fill in the information below. | | | | | |
| | Creditor Name and Address | Describe the Property | | Date | | Value of the property |
| | | Explain what happene | d | | | property |

Debtor 1 Karrine K. Gatenby

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Case number (if known)

| | Creditor Name and Address | Describe the Property | Date | Value of the |
|--------------------|--|--|-----------------------------|------------------------|
| | | Explain what happened | | property |
| | Toyota Motor Credit Corp. Toyota Financial Services | 2013 Toyota Prius with 55,000 miles | 12/29/2015 | \$10,000.00 |
| | P.O. Box 8026 | ■ Property was repossessed. | | |
| | Cedar Rapids, IA 52408 | ☐ Property was foreclosed. | | |
| | | ☐ Property was garnished. | | |
| | | \square Property was attached, seized or levied. | | |
| 11. | Within 90 days before you filed for ban accounts or refuse to make a payment No | kruptcy, did any creditor, including a bank or financia because you owed a debt? | al institution, set off any | amounts from your |
| | Yes. Fill in the details. | | | |
| | Creditor Name and Address | Describe the action the creditor took | Date action was | Amount |
| | Creditor Name and Address | Describe the action the creditor took | taken | Amount |
| Pa r 13. | | ns cruptcy, did you give any gifts with a total value of mo | ore than \$600 per person | n? |
| | Yes. Fill in the details for each gift. | | | |
| | | Describe the rifts | D-1 | Valore |
| | Gifts with a total value of more than \$6 per person | Describe the gifts | Dates you gave the gifts | Value |
| | Person to Whom You Gave the Gift an Address: | d | | |
| 14. | Within 2 years before you filed for bank | cruptcy, did you give any gifts or contributions with a | total value of more than | n \$600 to any charity |
| | No | | | |
| | ☐ Yes. Fill in the details for each gift or | contribution. | | |
| | Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co | · | Dates you contributed | Value |
| Par | t 6: List Certain Losses | | | |
| | | uptcy or since you filed for bankruptcy, did you lose | anything because of the | eft, fire, other |
| | ■ No | | | |
| | ☐ Yes. Fill in the details. | | | |
| | Describe the property you lost and | Describe any insurance coverage for the loss | Date of your | Value of property |
| | how the loss occurred | Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property.</i> | loss | lost |

Debtor 1 Karrine K. Gatenby

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Debtor 1 Karrine K. Gatenby

Case number (if known)

| гаг | List Certain Fayinents of Transiers | | | | | |
|--|--|--|---|-----------------------|--|-------------------------------|
| 16. | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. | | | | | |
| | □ No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | Description and values | alue of any proper | ty | Date payment or transfer was made | Amount of payment |
| | Franks, Gerkin & McKenna 19333 East Grant Highway Marengo, IL 60152 | \$1,200.00 Attorn \$335.00 Filing fe \$38.00 Credit re | e | | 1/2015-1/2016 | \$1,573.00 |
| | CC Advising, Inc. | \$14.00 for credit | counseling cours | е | 1/7/2016 | \$14.00 |
| Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any proper promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. | | | | r transfer any propei | ty to anyone who | |
| | Person Who Was Paid Address | Description and value transferred | alue of any proper | ty | Date payment or transfer was made | Amount of payment |
| 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or othe transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the grainclude gifts and transfers that you have already listed on this statement. | | | | | | |
| | No Yes. Fill in the details. | | | | | |
| | | December and | alua af | Dagariha | | Data transfer was |
| | Person Who Received Transfer Address | property transferred payments | | | iny property or received or debts change | Date transfer was made |
| | Person's relationship to you | | | | | |
| 19. | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No | | | | | |
| | Yes. Fill in the details. Name of trust | Description and | Description and value of the property transferred | | | Date Transfer was |
| | | | | | | made |
| | rt 8: List of Certain Financial Accounts, Instru | • | · | • | | |
| 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benesold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions | | | | | | , , |
| | houses, pension funds, cooperatives, associat No Yes. Fill in the details. | ions, and other fina | ncial institutions. | | | |
| | | st 4 digits of | Type of account of | or Dat | e account was | Last balance |
| | | count number | instrument | clo | sed, sold, ved, or nsferred | before closing or transfer |
| | | | | | | |

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| | | 3 | |
|----------|--------------------|---|------------------------|
| Debtor 1 | Karrine K. Gatenby | | Case number (if known) |

| 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? | | | | | | | | |
|--|---|---|---------------------------------------|-----------------------|--|--|--|--|
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? | | | | |
| 22. | Have you stored property in a storage unit or p | place other than your home within 1 | year before you filed for bankruptcy | | | | | |
| | NoYes. Fill in the details. | | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? | | | | |
| Par | 19: Identify Property You Hold or Control for | Someone Else | | | | | | |
| 23. | Do you hold or control any property that some for someone. | one else owns? Include any proper | ty you borrowed from, are storing for | , or hold in trust | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | Describe the property | Value | | | | |
| Par | t 10: Give Details About Environmental Inform | nation | | | | | | |
| For | the purpose of Part 10, the following definitions | s apply: | | | | | | |
| | Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. | | | | | | | |
| | Site means any location, facility, or property as to own, operate, or utilize it, including disposa | - | law, whether you now own, operate, o | or utilize it or used | | | | |
| | Hazardous material means anything an environ hazardous material, pollutant, contaminant, or | | s waste, hazardous substance, toxic s | substance, | | | | |
| Rep | ort all notices, releases, and proceedings that y | you know about, regardless of when | n they occurred. | | | | | |
| 24. | Has any governmental unit notified you that yo | ou may be liable or potentially liable | under or in violation of an environme | ental law? | | | | |
| | NoYes. Fill in the details. | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | | |
| 25. | Have you notified any governmental unit of any release of hazardous material? | | | | | | | |
| | NoYes. Fill in the details. | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | | |
| | | | | | | | | |

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| De | ebtor 1 Karrine K. Gatenby | | Case number (if known) | | | | | | |
|------------|---|---|--|---------------------------|--|--|--|--|--|
| | | | | | | | | | |
| 26. | Have you been a party in any judicial or ad | Iministrative proceeding under any env | ironmental law? Include settle | ments and orders. | | | | | |
| | _ | 3 | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Case Title | Court or agency | Nature of the case | Status of the | | | | | |
| | Case Number | Name Address (Number, Street, City, | | case | | | | | |
| | | State and ZIP Code) | | | | | | | |
| Pa | rt 11: Give Details About Your Business of | r Connections to Any Business | | | | | | | |
| 27. | Within 4 years before you filed for bankrup | otcy, did you own a business or have a | ny of the following connection | s to any business? | | | | | |
| | ☐ A sole proprietor or self-employed | in a trade, profession, or other activity | , either full-time or part-time | | | | | | |
| | ☐ A member of a limited liability com | pany (LLC) or limited liability partnersh | nip (LLP) | | | | | | |
| | ☐ A partner in a partnership | | | | | | | | |
| | ☐ An officer, director, or managing e | xecutive of a corporation | | | | | | | |
| | ☐ An owner of at least 5% of the voti | ng or equity securities of a corporation | | | | | | | |
| | No. None of the above applies. Go to | No. None of the above applies. Go to Part 12. | | | | | | | |
| | ☐ Yes. Check all that apply above and fi | II in the details below for each busines | S. | | | | | | |
| | Business Name Address | Describe the nature of the business | Employer Identification Do not include Social Se | | | | | | |
| | (Number, Street, City, State and ZIP Code) | Name of accountant or bookkeeper | | ecurity number of frint. | | | | | |
| | | | Dates business existed | | | | | | |
| 28. | Within 2 years before you filed for bankrup institutions, creditors, or other parties. | otcy, did you give a financial statement | to anyone about your busines | s? Include all financial | | | | | |
| | ■ No | | | | | | | | |
| | Yes. Fill in the details below. | | | | | | | | |
| | Name Address | Date Issued | | | | | | | |
| | (Number, Street, City, State and ZIP Code) | | | | | | | | |
| Pai | rt 12: Sign Below | | | | | | | | |
| | ave read the answers on this Statement of F | | | | | | | | |
| | true and correct. I understand that making h a bankruptcy case can result in fines up to | | | ty by fraud in connection | | | | | |
| 18 L | U.S.C. §§ 152, 1341, 1519, and 3571. | | | | | | | | |
| | Karrine K. Gatenby | Olamatama of Dalutan C | | | | | | | |
| | arrine K. Gatenby gnature of Debtor 1 | Signature of Debtor 2 | | | | | | | |
| Da | ite January 18, 2016 | Date | | | | | | | |
| | you attach additional pages to Your Staten | agent of Einancial Affairs for Individuals | Filing for Pankruptov (Official | Form 107\2 | | | | | |
| | | ient of i mancial Aman's for mulviduals | Tilling for Ballkruptcy (Official | 10111107): | | | | | |
| | Yes | | | | | | | | |
| | l you pay or agree to pay someone who is no | ot an attorney to help you fill out bankru | uptcy forms? | | | | | | |
| | | muntas Patition Duamanada Nation D. J. | tion and Cinnet (Official E | . 440) | | | | | |
| ⊔ \ | Yes. Name of Person Attach the Bank | τυριός Petition Preparer's Notice, Declarat | uon, and Signature (Oπicial Form | 1 119). | | | | | |

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| Fill in this inform | nation to identify your | case: | | |
|--------------------------------|---|---------------------|---|---|
| Debtor 1 | Karrine K. Gatenby | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 Spouse if, filing) | First Name | Middle Name | Last Name | |
| - | nkruptcy Court for the: | NORTHERN DIS | TRICT OF ILLINOIS | |
| | intropiety Court for the. | - NORTHER TO BE | THE OF ILLINOIS | |
| Case number if known) | | | | ☐ Check if this is an |
| | | | | amended filing |
| Official For | rm 108 | | | |
| | | n for Indiv | viduals Filing Under Chapt | er 7 |
| | | | Traduction graphs | 12/10 |
| | vidual filing under cha claims secured by yo | • | ill out this form if: | |
| | ed personal property a | | not expired. | |
| ou must file this | form with the court were is earlier, unless the | ithin 30 days after | r you file your bankruptcy petition or by the date s ne time for cause. You must also send copies to t | |
| | | r in a joint case h | oth are equally responsible for supplying correct | information. Both debtors must |
| | d date the form. | m a joint case, b | our are equally responsible for supplying correct | mormation. Both debtors must |
| se as complete a | nd accurate as possib | le. If more space i | s needed, attach a separate sheet to this form. O | n the top of any additional pages |
| write yo | ur name and case nur | nber (if known). | | |
| Part 1: List Yo | ur Creditors Who Hav | e Secured Claims | | |
| . For any credito | rs that you listed in Pa | art 1 of Schedule I | D: Creditors Who Have Claims Secured by Proper | rtv (Official Form 106D), fill in the |
| information bel | | | | |
| identity the cre | untor and the property t | nat is conateral | What do you intend to do with the property the secures a debt? | at Did you claim the propert as exempt on Schedule C |
| | | | | |
| Creditor's To | yota Motor Credit Co | orp. | ■ Surrender the property. | □ No |
| name: | | | Retain the property and redeem it. | _ |
| 5 | | " | ☐ Retain the property and enter into a | ■ Yes |
| | 2013 Toyota Prius 8 | | Reaffirmation Agreement. | |
| property securing debt: | Vehicle repossesse 12/29/2015 | a by creditor | ☐ Retain the property and [explain]: | |
| Part 2: List Yo | ur Unexpired Persona | I Property I eases | | |
| or any unexpired | d personal property le | ase that you listed | in Schedule G: Executory Contracts and Unexpi | |
| | | | nexpired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p | |
| Deseribe verm un | avaired nercenal area | nowty looped | | Will the lease be assumed? |
| Describe your ur | nexpired personal pro | Derty leases | | Will the lease be assumed? |
| _essor's name: | | | | □ No |
| Description of lease | sed | | | |
| Property: | | | | ☐ Yes |
| essor's name: | | | | □ No |
| Description of lease Property: | sed | | | □ Voo |
| | | | | ☐ Yes |
| Lessor's name: | | | | □ No |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| Debtor 1 Karrine K. Gatenby | Case number (if known) |
|---|---|
| Description of leased Property: | ☐ Yes |
| Lessor's name: Description of leased Property: | □ No □ Yes |
| Lessor's name: Description of leased Property: | □ No □ Yes |
| Lessor's name: Description of leased Property: | □ No □ Yes |
| Lessor's name: Description of leased Property: | □ No □ Yes |
| Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my interproperty that is subject to an unexpired lease. | ention about any property of my estate that secures a debt and any personal |
| X /s/ Karrine K. Gatenby Karrine K. Gatenby Signature of Debtor 1 | X Signature of Debtor 2 |
| Date January 18, 2016 | Date |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-80084 Doc 1 Filed 01/18/16 Entered 01/18/16 11:27:56 Desc Main Document Page 49 of 55

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In | e Karrine K. Gatenby | | Case N | о. | | | | |
|---|--|---|--------------------|---------------|-------------------------|-------|--|--|
| | | Debtor(s) | Chapte | r 7 | | | | |
| | DISCLOSURE OF COMPEN | SATION OF ATTO | RNEY FOR | DEBTOI | R(S) | | | |
| 1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for ser be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: | | | | | | | | |
| | For legal services, I have agreed to accept | | \$ | 1,2 | 00.00 | | | |
| | Prior to the filing of this statement I have received | | | 1,2 | 00.00 | | | |
| | Balance Due | | \$ | | 0.00 | | | |
| 2. | \$ 335.00 of the filing fee has been paid. | | | | | | | |
| 3. | The source of the compensation paid to me was: | | | | | | | |
| | ■ Debtor □ Other (specify): | | | | | | | |
| 4. | The source of compensation to be paid to me is: | | | | | | | |
| | ■ Debtor □ Other (specify): | | | | | | | |
| 5. | ■ I have not agreed to share the above-disclosed compe | nsation with any other person | unless they are m | embers and | associates of my law | firm. | | |
| ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. | | | | | | | | |
| 6. | In return for the above-disclosed fee, I have agreed to ren | der legal service for all aspect | s of the bankrupto | ey case, incl | uding: | | | |
| | a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods. | | | | | | | |
| 7. | By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding. | | | | | | | |
| | | CERTIFICATION | | | | | | |
| this | I certify that the foregoing is a complete statement of any bankruptcy proceeding. | agreement or arrangement for | payment to me for | r representa | tion of the debtor(s) i | n | | |
| | January 18, 2016 | /s/ Rebecca Lamn | 1 | | | | | |
| _ | Date | Rebecca Lamm | | | | | | |
| | | Signature of Attorne Franks Gerkin & M | | | | | | |
| | | 19333 E Grant Hw | y | | | | | |
| | | P.O. Box 5 Marengo, IL 60152 | 2 | | | | | |
| | | 815-923-2107 Fa | | 1 | | | | |
| | | Name of law firm | | | | | | |
| | | | | | | | | |

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(815) 923-2107

CONTRACT FOR CHAPTER 7 BANKRUPTCY FILING

I/We am/are retaining the office of Franks, Gerkin & McKenna, P.C. to prepare and file a Chapter 7 Bankruptcy case on my behalf and to represent me/us through the conclusion of the case and entry of a discharge.

I/We understand that the attorneys fees for representation shall be billed as a flat fee of \$\left\ \left\ \frac{1.200.00}{0.00}\$ and must be paid prior to the filing of my Chapter 7 Bankruptcy case. In addition to the above-stated fees, I must also pay court filing fees in the amount of \$335.00, any fees associated with obtaining a credit report (\$38.00 individual/\$68.00 joint), and any other costs associated with my case. I/We understand that the total attorneys fees and costs for representing me are estimated to be \$\left\ \left\ \frac{3.00}{0.00}\$.

I/We understand that if I/we file a Chapter 7 Bankruptcy and must add any creditors after the petition is filed, a \$30.00 filing fee must be paid in advance to FRANKS, GERKIN & McKENNA, P.C. I/We agree to pay any such additional filing fee. Further, any additional legal work outside of the normal course of a standard Bankruptcy that must be performed by the Attorney is not included in the flat fee quoted and will require a separate retainer fee and a separate retainer agreement. The following events/cases are not included in the flat rate fee stated above:

- 1. Any adversary cases
- 2. Any objections to discharge or claims of exemptions
- 3. Any motions to avoid liens of creditors

I/We understand that all of my/our property must be retained until FRANKS, GERKIN & McKENNA, P.C. or the Trustee has given me/us permission to sell or return any items.

In a Chapter 7, any property received through inheritance within 180 days following my/our bankruptcy filing must be turned over to the Trustee in my/our case.

I/We understand the penalty for making a false statement or concealing property is a fine of up to \$500,000.00 or imprisonment for up to five years or both. (18 U.S.C. Sections 152 and 3571)

United States Bankruptcy Court Northern District of Illinois

| | | Northern District of Illinois | | |
|-------|--|---|---------------------------|------------------|
| In re | Karrine K. Gatenby | Debtor(s) | Case No. Chapter 7 | |
| | VE | ERIFICATION OF CREDITOR MA | ATRIX | |
| | | Number of C | Creditors: | 3 |
| | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of credito | ers is true and correct t | o the best of my |
| Date: | <u>January 18, 2016</u> | /s/ Karrine K. Gatenby Karrine K. Gatenby Signature of Debtor | | |

Advocate Good Shepherd P.O. Box 4248 Carol Stream, IL 60197

Advocate Good Shepherd Hospital P.O. Box 3039 Hinsdale, IL 60522

Advocate Medical Group 8550 West Bryn Mawr Avenue 8th Floor Chicago, IL 60631

Alexian Brothers Health Hospital 21272 Network Place Chicago, IL 60673

AT&T Mobility P.O. Box 6416 Carol Stream, IL 60197

AT&T Uverse PO Box 6014 Carol Stream, IL 60197

Avant Inc. 640 N. Lasalle St. Chicago, IL 60654

Capital One Attn: Bankruptcy P.O. Box 30285 Salt Lake City, UT 84130

Capital One P.O. Box 6492 Carol Stream, IL 60197

Cary Junior High 2109 Crystal Lake Road Cary, IL 60013 Consumer Financial Services c/o Jason S. Harris, LLC 300 Saunders Rd. Suite 100 Riverwoods, IL 60015

Consumer Financial Services 300 South Green Bay Rd. Waukegan, IL 60085

Credit One Bank N.A. P.O. Box 98873 Las Vegas, NV 89193

FMA Alliance, Ltd. P.O. Box 2409 Houston, TX 77252

Harris & Harris Ltd. 111 West Jackson Boulevard Suite 400 Chicago, IL 60604-4134

Harris & Harris, Ltd. 222 Merchandise Mart Plaza Suite 1900 Chicago, IL 60654

Jeff Mahovski 1054 South Hampton Drive Round Lake, IL 60073

Jeff Mahovski 1054 South Hampton Drive Round Lake, IL 60073

Malcolm S. Gerald & Associates, Inc 332 South Michigan Avenue Suite 600 Chicago, IL 60604

Mark Walker and Dorine Walker 803 Surrey Lane Algonquin, IL 60102 Medical Business Bureau P.O. Box 1219
Park Ridge, IL 60068

Medical Business Bureau, LLC P.O. Box 1219
Park Ridge, IL 60068

Midland Credit Management 8875 Aero Drive Suite 200 San Diego, CA 92123

Midland Funding 2635 Northside Dr. Ste. 300 San Diego, CA 92108

Northwest Collectors 3601 Algonquin Rd. Suite 232 Rolling Meadows, IL 60008

Oac P.O. Box 500 Baraboo, WI 53913

Springleaf Financial Services 601 NW 2nd St. Evansville, IN 47708

Stellar Recovery Inc. 1327 Hwy 2 W Kalispell, MT 59901

Take Charge America 20620 N. 19th Ave Phoenix, AZ 85027

Take Charge America P.O. Box 83330 Phoenix, AZ 85071

Toyota Financial Services P.O. Box 5855 Carol Stream, IL 60197

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Toyota Motor Credit Corp. Toyota Financial Services P.O. Box 8026 Cedar Rapids, IA 52408

Tri-County Emergency Physician P.O. Box 98 Barrington, IL 60011